

CONTRACTOR'S NAME: _____
CONTRACT NUMBER: _____
CONTRACT PERIOD: _____
CONTRACTOR'S FISCAL YEAR: _____

**CONTRACT DETERMINATION QUESTIONNAIRE
(PURCHASE OF SERVICE VS. FINANCIAL ASSISTANCE)**

*The Programmatic Individual should place a check mark in the box under either the YES or NO column for each question.
For definitions of "key terms" for each question, please see the next page.
Additional space is provided on the back for comments if needed.*

	Yes	No
1. Does the contract Contractor determine client eligibility? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Does the contract Contractor authorize services on a client specific basis? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Does the contract Contractor determine the appropriateness of the services to be provided? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Does the contract Contractor provide programmatic functions for the contract, such as:		
a. Program evaluation? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Program planning? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. Monitoring? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. Develop program standards, procedures, and rules? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Does the contract Contractor have responsibility for program compliance? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Does the contract Contractor have to submit a cost report to satisfy a cost reimbursement arrangement? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Does the contract Contractor have any obligation to the funding authority other than the delivery of the specified goods/services? Comments: _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Does the contract Contractor operate in a competitive environment? Comments: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. Does the contract Contractor provide similar goods and/or services to many different purchasers? Comments: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10. Does the contract Contractor provide the goods and/or services within normal business operations? Comments: _____	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Check marks inside the gray boxes may indicate a Purchase of Service Contract.

Check marks inside the clear boxes may indicate a Financial Assistance Contract.

NOTE: The Contract Coordinator will place a check mark in one of the boxes below to indicate the type of contractual arrangement for this contract, then sign and date as the Administrative Individual.

☐ PURCHASE OF SERVICE

☐ FINANCIAL ASSISTANCE

Signature of Authorized Administrative Individual

Date

Signature of Authorized Programmatic Individual

Date

CONTRACTOR'S FISCAL YEAR: _____

[illegible]